## Index of Claims

| App | licat | ion/ | Con | trol | No. |
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10551827

SHIOMI ET AL.

Examiner

MELANIE J HAND

Reexamination Art Unit

3761

Applicant(s)/Patent Under

| <b>✓</b> | Rejected |
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| =        | Allowed  |

| - | Cancelled  |
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| ÷ | Restricted |

| N | Non-Elected  |  |  |  |  |  |  |  |
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| 1 | Interference |  |  |  |  |  |  |  |

| Α | Appeal   |  |  |  |  |  |  |
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| О | Objected |  |  |  |  |  |  |

| claims | renumbered | in the same | order as pre | sented by a | pplicant |  | ☐ CPA | □ т.п | , Ц | R.1.47 |
|--------|------------|-------------|--------------|-------------|----------|--|-------|-------|-----|--------|
| CLAIM  |            |             |              |             | DATE     |  |       |       |     |        |
| Final  | Original   | 09/29/2008  | 02/24/2009   |             |          |  |       |       |     |        |
|        | 1          | +           | <b>√</b>     |             |          |  |       |       | 1   |        |
|        | 2          | +           | N            |             |          |  |       |       |     |        |
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|        | 4          | +           | ✓            |             |          |  |       |       |     |        |
|        | 5          | +           | =            |             |          |  |       |       |     |        |
|        | 6          | +           | N            |             |          |  |       |       |     |        |
|        | 7          | +           | ✓            |             |          |  |       |       |     |        |
|        | 8          | +           | ·            |             |          |  |       |       |     |        |
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|        | 10         | +           | ✓            |             |          |  |       |       |     |        |
|        | 11         | +           | N            |             |          |  |       |       |     |        |
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|        | 19         | +           | N            |             |          |  |       |       |     |        |
|        | 20         | +           | N            |             |          |  |       |       |     |        |
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|        | 22         | +           | N            |             |          |  |       |       |     |        |
|        | 23         | +           | N            |             |          |  |       |       |     |        |
|        | 24         | +           | N            |             |          |  |       |       |     |        |
|        | 25         | +           | N            |             |          |  |       |       |     |        |
|        | 26         | +           | N            |             |          |  |       |       |     |        |
|        | 27         | +           | N            |             |          |  |       |       |     |        |
|        | 28         | +           | N            |             |          |  |       |       |     |        |
|        | 29         | +           | N            |             |          |  |       |       |     |        |
|        | 30         | +           | N            |             |          |  |       |       |     |        |
|        | 31         | +           | N            |             |          |  |       |       |     |        |
|        | 32         | +           | N            |             |          |  |       |       |     |        |
|        | 33         | +           | N            |             |          |  |       |       |     |        |
|        | 34         | +           | N            |             |          |  |       |       |     |        |
|        | 35         |             | N            |             |          |  |       |       |     |        |
|        | 36         | +           | N            |             |          |  |       |       |     |        |

| Index of Claims |  |  |  |  |  |  |  |  |  |
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| Ī | Application/Control No. | Applicant(s)/Patent Under |
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|   |                         | Reexamination             |
|   | 10551827                | SHIOMI ET AL.             |
|   | Examiner                | Art Unit                  |
|   | MELANIE J HAND          | 3761                      |

| *   | Rejected |          |              | •      | Can       | celled |                | N I | NOII-E | ected  |         | ^ | App  | Dear |
|---|----------|----------|--------------|--------|-----------|--------|----------------|-----|--------|--------|---------|---|------|------|
| = Allowed   |          |          | ÷ Restricted |        |           |        | I Interference |     |        |        | O Objec |   | cted |      |
|   |          |          |              |        |           |        |                |     |        |        |         |   |      |      |
| ☐ Claims renumbered in the same order as presented by applicant ☐ CPA ☐ T.D. ☐ R.1.47 |          |          |              |        |           |        |                |     |        | R.1.47 |         |   |      |      |
| CLAIM   |          |          |              |        |           |        |                |     | DATE   |        |         |   |      |      |
| Final   |          | Original | 09/29/20     | 008 0  | 2/24/2009 |        |                |     |        |        |         |   |      |      |
|   |          | 37       | +            |        | Ν         |        |                |     |        |        |         |   |      |      |
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|   |          | 39       | +            |        | N         |        |                |     |        |        |         |   |      |      |
|   |          | 40       | +            |        | N         |        |                |     |        |        |         |   |      |      |
|   |          | 41       | +            |        | N         |        |                |     |        |        |         |   |      |      |
|   |          | 42       | *            |        | N         |        |                |     |        |        |         |   |      |      |
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|   |          | 44       | +            |        | N         |        |                |     |        |        |         |   |      |      |
| 45  |          | 45       | +            | Т      | N         |        |                |     |        |        | I —     |   |      |      |

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